

Sup Lancaster City and County
med. Soc

*Compliments of
H. Black, M.D.
Shawburg*

IN MEMORIAM.

JOHN LIGHT ATLEE, M. D., LL.D.,

BORN NOV. 2d, 1799, DIED OCT. 1st, 1885.



PROCEEDINGS

✓
OF THE

LANCASTER CITY AND COUNTY MEDICAL SOCIETY

RELATIVE TO THE DEATH OF

JOHN LIGHT ATLEE, M. D., LL.D.,

ALSO

AN ADDRESS IN HIS MEMORY

DELIVERED BEFORE THEM

NOVEMBER 4th, 1885.

BY

J. L. ZIEGLER, A. M., M. D.,

OF MOUNT JOY, PA.



LANCASTER, PA.:
INQUIRER PRINTING COMPANY.

1885.

PURSUANT to notice, the members of the Lancaster City and County Medical Society convened in special session in their rooms, Grand Army Hall, on the afternoon of October 5, 1885, to adopt resolutions of respect and condolence in reference to the death of John Light Atlee, M. D., LL. D.

The President, William Compton, in the chair, announced the death of Dr. Atlee, with appropriate remarks.

On motion, a committee of three was constituted to submit resolutions of respect. The Committee, Drs. Ehler, Carpenter, and Deaver, appointed for that purpose, reported the following, which were unanimously adopted:

RESOLUTIONS OF RESPECT.

It is with profound sadness that the members of the Lancaster City and County Medical Society come hither to pay tribute to the memory of our late venerable senior member, John Light Atlee, M. D., LL. D., who without interruption for sixty-five years enjoyed an extensive practice, and prosecuted his labors with distinguished ability, and who was identified with this Society since its organization. He took a deep interest in its progress, and was constant in his efforts to promote its honor and dignity. We are sure that there is not one of all of us present who does not feel that he has not himself sustained an individual loss in the removal from among us of our distinguished and venerable colleague—a man whose mind was thoroughly medical and practical. As a surgeon he was remarkably successful and eminent, his success in a measure being due to his resolute will and great nerve; he was able to act himself and able to guide the counsel of others.

He was prominent as one of the pioneers in this country for the successful operation of ovariectomy. This alone entitles his memory to a tribute of grateful recognition by the profession, and a place upon the records of this Society.

In private life he was circumspect and perfect in all his business relations, and won many warm friends by his generous nature. His true benevolence was a part of the good he

did. No one but himself knew it all, his modest manliness continually striving to conceal his own works. In his death his family has sustained an irreparable loss, which is shared in sympathy by a large circle of friends in his old home. Be it, therefore,

Resolved, That we sympathize with our citizens in the loss which they have sustained by his death, and respectfully tender our condolence to his family.

Resolved, That the Lancaster City and County Medical Society as a body especially feel their loss in the death of Dr. Atlee. The place occupied by such a man amongst his fellow members and immediate medical friends will not be easily filled. We deplore his loss.

Resolved, That the members of this Society attend the funeral of our deceased brother in a body, and tender our services as pall-bearers.

Resolved, That an attested copy of these proceedings be sent to the family of the deceased, and entered at length upon the records of our Society.

Signed,

J. AUG. EHLER,
HENRY CARPENTER,
J. MONTGOMERY DEEVER,
Committee.

It was then announced by Dr. Oliver Roland, that the family of Dr. Atlee had requested that members of the Society act as pall-bearers. The following persons being suggested, were accordingly appointed: Drs. J. Aug. Ehler, Henry Carpenter, William Compton, William Blackwood, of this city, and Drs. J. L. Ziegler, of Mt. Joy, J. M. Deaver, of Buck, J. A. Thomson, of Wrightsville, and Harmony A. Smith, of Intercourse.

Dr. J. L. Ziegler, of Mt. Joy, was appointed to prepare a

sketch of the life and services of Dr. Atlee, to be read at the November meeting of the Society.

Remarks on the character and services of Dr. Atlee to the medical profession were made by Drs. Ehler, Carpenter, Craig, Welchans and Ziegler, on the conclusion of which the Society adjourned to attend the funeral.

At the November meeting, when the eulogy upon Dr. Atlee was delivered by Dr. Ziegler, the Society instructed Dr. Oliver Roland to prepare for publication in pamphlet form all of the proceedings relative to Dr. Atlee's death.

MEMORIAL ADDRESS.

MR. PRESIDENT AND MEMBERS OF THE LANCASTER CITY AND COUNTY MEDICAL SOCIETY.

In the midst of our daily rounds of professional duties, it will be profitable for us to pause and contemplate the character and abilities of one who has so recently left us, and who, during a long and laborious life, ever sought to elevate and adorn his well-chosen and beloved profession. Though we mourn our loss, yet we rejoice in the rich legacy of his bright example and illustrious deeds—an example of unremitting toil, studious application, honesty of purpose, and persevering determination.

He is gone from among us, and left none like him behind; a noble heart has ceased to beat forever; a great mind and a great career have been consigned to the memories of the past; his voice is hushed and still; the lustre of his eye is gone out, and we who are this day assembled to bear our feeble testimony to his worth and virtue, will no longer see him occupy his accustomed seat in our association.

His person medium in stature, slender and commanding, his countenance clear and expressive, indicating firmness and confidence in the truth of his convictions; ardent in the pursuit of every object which he believed essential to the attainment of his purposes; never obsequious to men, or submissive to opinions which he thought hostile to the best interests of his profession. The silly dogmas and fraudulent pretensions of quackery and ignorance were treated with scorn, and thrown aside with contempt, without fear or ceremony. He realized

that the characteristics of the age in which he lived are an increased and abiding attention to the observation of phenomena, and that the basis of all sound science is the deduction of general principles from them. His active mind was ever quick to observe, prompt to deduce, and skillful to apply.

Dr. Atlee was a physician in the true application of the term. He took a deep interest in every department of medicine. One of his greatest enjoyments was to meet with us and take part in our deliberations. He was as eager to hear the views of others, as he was willing to impart his own. His opinions were always presented in a clear and intelligible manner, so that every individual might be enabled to comprehend the force of his deductions, and be profited by the wealth of his experience.

While surgery occupied a prominent place in his life work, he was well prepared for, and enjoyed an extensive field in general practice; his celebrity as an obstetrician may be inferred from the number of cases of parturition which he attended.

The confidence reposed in him by the public, and by his professional brethren, afforded him an extensive consultation practice; his name was the synonym of hope and consolation in the hour of trial, difficulty and danger.

He has left on record 2125 important operations, embracing every department of surgery; including ovariectomy, lithotomy, amputations, operations for strangulated hernia, trephining, ligation of arteries, tracheotomy, and operations on the eye.

He attended 3264 parturitions. In estimating the labor in attending all these in conjunction with his extensive out-door practice in all the departments of medicine, we must take into consideration that his surgical work had no connection with the hospital or college amphitheatre, but was exclusively private and was distributed over a large scope of territory, often requiring his personal attention in the after-treatment at the

expense of much time and labor. His vigorous constitution, ardent love and untiring zeal for the work, united with an indomitable will in its prosecution, sustained him in a long and successful career of usefulness,—embracing a period of sixty-five years of active, laborious practice, and continued till a few days before his death. Though advanced to his eighty-sixth year, he retained the appearance and vigor of manhood in such a remarkable degree, that persons unacquainted with his age would scarcely be persuaded that he had passed his four score. While his long and extensive practice, associated with strict integrity and correct business habits, enabled him to accumulate an ample fortune, at the same time he did a large amount of unrequited and benevolent labor. He however was not unmindful of the honorarium; and whatever faults he may have had, from which, alas! none of us can claim immunity, no one can accuse him of seeking to enhance his own popularity by depreciating that remuneration for services to which every honorable physician is justly entitled.

To Dr. John L. Atlee belongs the honor of reviving the operation of ovariectomy; by his skill and assiduity he contributed and was in a marked degree instrumental in laying the foundation for its recognition as a legitimate operation; although he had acquired a more than national reputation, he never claimed, nor did he receive, that acknowledgement from the leading members of the profession which his labors as an ovariectomist deservedly merited; he was not intrusive or ostentatious; while he possessed undoubted abilities as a writer, his contributions to medical literature were not commensurate with the resources which his large experience afforded; his was too busy a life to permit much time to be devoted to the extension of fame through the medium of the press, hence his character as a great surgeon and physician was mainly appreciated by his more intimate professional associates.

In order to substantiate these premises, it is to be hoped that

you will pardon the digression of adverting to the history and status of ovariectomy antecedent and immediately subsequent to the time of Dr. Atlee's first operation.

The practicability of the removal of diseased ovaries was suggested by Dr. William Hunter as early as 1762. In 1785 John Hunter alludes to the possibility of the operation under certain favorable circumstances. John Edell, in 1794, forcibly and eloquently advocates its feasibility. Though he never performed the operation, no doubt his ardent and enthusiastic teachings impressed upon the mind of his pupil, Ephraim McDowell, of Kentucky, the determination to perform the operation should an opportunity occur; consequently, fourteen years after his return to his native country, McDowell, in December 1802, successfully performed the first operation for the entire removal of an ovarian cyst by the large abdominal section; hence the validity of his claim to priority is indisputable. In our own country, with the exception of McDowell's cases, the statistics are extremely meagre; prior to 1843 only five cases have been reported.

In Great Britain during the same period, fourteen cases are reported.—*Surgical Treatment of Abdominal Tumors by Sir Spencer Wells, Bart. 1885, page 50.*

The difficulties attending the diagnosis of abdominal tumors, the fatality following their extirpation, and the general disfavor among the profession was such that few surgeons were willing to undertake the operation. One of England's most eminent surgeons, Robert Liston, says: "The abdomen has been opened, as already stated, and the result has been such as to render the perpetrator indictable for culpable homicide, and to qualify him for such punishment as his rash and reckless conduct richly deserved. A less severe censure might have sufficed, had not the example been followed by similar proceedings, and equally direful results; and these have been such as to render any condemnatory remarks not only justifiable, but absolutely necessary. A great many unfortunate

women have, I am afraid, been sacrificed to a desire for false reputation."—*Elements of Surgery by Robert Liston, American edition by S. D. Gross, M. D., 1842, page 437.*

Dr. Ashwell, one of the professors in Guy's Hospital, strongly opposed the operation, and believed it would ever remain uncertain, although he appears to admit that it might be justifiable within certain limits, but these are so narrow as to exclude it almost entirely. He says: "If the operation is to come into established practice, of which I have the strongest doubts, it must be confined to examples of the malady where tapping has already been so often performed as to preclude from the experience of similar cases any idea that it can ever be dispensed with, and where we are confident that suffering must lead to early death. Perhaps this may be regarded as too limited a view of the value of extirpation, but it is, I think, the correct one."—*A Practical Treatise on the Diseases Peculiar to Women, by Samuel Ashwell, M. D., London, 1848, page 663.*

In our own country Dr. Meigs, whose eminent position in the profession you are familiar with, and of whose teachings many of you, no doubt, have personal recollections, says: "I am opposed, then, to the operation of ovariectomy, and I am opposed to it on the grounds of objection I consider valid against all surgery that is not unavoidable." "The ovariectomy operations are not unavoidable, since no one, I presume, would think of operating for a patient not remote from dissolution, and since, in any case not menacing a speedy termination of the life of the patient, the unavoidable necessity has not arrived."—*Females and their Diseases; A Series of Letters to his Class. By Charles D. Meigs, M. D. Philadelphia, 1844, pp. 313-14.*

The leading medical journals denounced the operation as unjustifiable and impracticable, and the testimony of many eminent writers might be multiplied, were it deemed necessary, in evidence of the opposition and reproach impending

upon the surgeon who had the courage to attempt the operation.

The fatality attending its early practice was seized upon with avidity, and used with damaging effect by the enemies of ovariotomy; consequently it is not surprising that the operation was practically abandoned.

Under those opposing contingencies, and fully conscious of the difficulties which were to be encountered, and having no one more experienced than himself with whom he could advise, Dr. Atlee, on the 26th of June, 1843, performed his first operation of ovariotomy with success, removing both ovaries; the patient recovering speedily has outlived her physician, enjoying excellent health, and is now in the 74th year of her age.—*Vide Amer. Med. Jour. for January, 1884, in which a full report is published.*

Those only whose surgical experience antedates the discovery of anesthetics, can appreciate how much the horrors of surgery have been mitigated, and how much their application adds to the calmness and success of the operator. When we are reminded that this operation was performed before anesthetics were known, and when the operation was abandoned, condemned by the profession as cruel, barbarous, and unjustifiable, popular clamor demanding the performer as a murderer; when under circumstances and adverse influences so discouraging the operation is undertaken and successfully performed, does it not entitle him who thus revives the operation to be encircled with a halo of heroism, and endow him with the attribute of courage possessed by few?

The success of Dr. Atlee in his subsequent operations compares favorably with that of the most eminent ovariotomists. The difficulty of obtaining correct data of the earlier operations makes it hard to give true estimates of the mortality, which no doubt is much higher than the figures indicate. Mr. John Clay, of Birmingham, including all cases of which he had been able to obtain particulars up to the year 1860, states that

the number operated upon was 395, of whom 183 died, making the death-rate 47 per cent.—*Hewitt's Diseases of Women*, Vol. ii., page 384.

In an article by Spencer Wells on diseases of the ovaries (*Quain's Dictionary of Medicine*, page 1077), he says: "Before 1860 so many unsuccessful cases were concealed, and the numbers who died of the cases reported were so great, that the calculated mortality of about 50 per cent, or half the patients operated on, is probably far too small, and it would be more correctly estimated at 70 to 80 per cent. Since 1860 it has been gradually diminishing from 35 to 15 per cent;" "and since 1878, when antiseptics came into general use here and in Germany, it has fallen below 10 per cent., whilst well-founded hopes are entertained of a still smaller mortality."

Spencer Wells, who has operated more frequently than any other surgeon, is unquestionably the highest authority on the subject, having operated on 1,000 cases, of which 768 recovered and 232 died, making an average death-rate of 23.2 per cent. As the narrative of his first attempt furnishes evidence in corroboration of the unfavorable views entertained respecting the operation and the difficulties that may be encountered, it will, I trust, be sufficient excuse for introducing it in detail; at the same time you will bear in mind that it was performed 14 years after Dr. Atlee's first operation. In his work on the surgical treatment of abdominal tumors (page 51-52), he says: "We did not often see cases of ovarian disease at that time (1856), but they did appear occasionally. As I have said, Brown (*Baker Brown*) had given up the operation, very few others were attempting it, and most men were lapsing into the old state of indifference, if they were not loudly protesting against it. During the autumn of 1857 a young woman was under treatment for what appeared to be an ovarian tumor on the left side. Opinions were confidently expressed that this could not be an ovarian tumor, because intestines could be felt in front of it. But I determined to see

what it was, and in December 1847, 27 years ago, I prepared for my first ovariectomy. Reflecting upon all the ways and forms of using the ligature, I had resolved to use the serpent for the division of the pedicle, as was done some months after the publication of my suggestions, by Dr. John L. Atlee."

"As soon as I opened the peritoneum, and it was proved beyond all doubt that the tumor was behind the intestines, I was induced very unwillingly to close the wound and do nothing more. The patient recovered without any bad symptoms, but died four months afterwards, in St. Bartholomew's Hospital, when it was found that there was a tumor of the left ovary, which might have been removed quite easily."

A careful examination of the history of this operation, from its inception to the present time, will afford ample testimony to show that it was met with more determined opposition, bore a greater reproach, required more courage in its prosecution, and at last was crowned with a more triumphant success, than any other surgical operation known in history. That Dr. Atlee sustained his full share of its hardships has already been established. It remains therefore only to be shown that he is entitled to a just proportion of its triumphs, and to a prominent position in the ranks of its most illustrious defendants. Although he cannot compete in the number of operations, his success equals the most distinguished operators, as will be seen by comparing the results with the most noted and trustworthy reports.

His operations of ovariectomy extended over a period of 40 years, from June 29th, 1843, to December 14th, 1883, and numbered 78, of which 64 recovered and 14 died, making a general death-rate of 18 per cent. If we divide the time occupied by Dr. Atlee's operations into two periods of 20 years each, we find that he operated 18 times up to December 14th, 1863, resulting in 14 recoveries and 4 deaths, making a death-rate of 22.22 per cent. During the second period, from 1863 to December 14th, 1883, the time of his last operation, he had

60 cases, resulting in 50 recoveries and 10 deaths, reducing the death rate to 16.66 per cent.

It has already been shown upon authority of Spencer Wells that prior to 1860 the reported mortality was 50 per cent., greatly in excess of Dr. Atlee's at the same period; by referring to his own table (Spencer Wells on Abdominal Tumors, page 59), it will be found that his first 100 operations, up to June, 1864, resulted in a mortality of 34 per cent., 11.78 greater than Dr. Atlee's at the same time. His general mortality in 1000 cases is 23.2 per cent., exceeding Dr. Atlee's general mortality by 5.2 per cent. However, as it is conceded that experience is a more prominent element of success in ovariectomy than in any other operation usually termed capital, it was to be expected, and has been happily realized, by the reduction of the rate of mortality to 11 per cent., by England's most eminent ovariectomist, Spencer Wells, in the last 100 of his operations.

We can the more highly rejoice, when we remember that this result is a triumphant vindication of the practicability of an operation, the responsibility of which our departed friend assumed when others had abandoned the field, when surrounded by gloomy forebodings, assailed by contumely, without the aid of those modern discoveries which add so much to its success, with few of his professional brethren to whom to look for counsel, and none to assist him by their experience; but alone, with an abiding confidence in the rectitude of his purpose, by his skill and courage he has placed his name among those who have won a renown which shall endure when ovariectomy shall no longer be a necessity, and monuments shall have crumbled into dust.

Although the record of his achievements has not been spread upon the pages of medical literature, he died not without having received the honors of distinguished merit. The part he took as one of the founders of this Society, and the interest which he showed in its welfare, will ever be held

in grateful remembrance by those who have been associated with him. As one of the founders and President of both the State and National Medical Associations, we feel a just pride in the distinction reflected upon our Society by his elevation to the highest honors of the profession. The esteem in which he was held by the public, is manifested by his being chosen to fill important positions in the management of many of our public institutions.

He occupied the chair of Professor of Anatomy and Physiology in Franklin and Marshall College for a number of years, and was President of the Board of Trustees of the State Lunatic Asylum at Harrisburg, while the interest which he took in all the duties of citizenship is characteristic of his self-denying labor for the good of others.

In his home he was kind and indulgent, in society companionable, in conversation pleasing and agreeable.

He was long a consistent and devoted member of the Episcopalian Church, taking an active part in its councils, and in everything that pertained to its welfare and the advancement of the Redeemer's kingdom, contributing freely of his means for its support and benevolent objects, and by his rectitude and diligence in his calling, and the purity of his motives, he adorned the doctrines which he professed with reverent acknowledgment and an abiding faith and dependence in the merits of the Saviour. He came to his "grave in a full age, like as a shock of corn cometh in, in his season." "And I heard a voice from heaven say, Blessed are the dead which die in the Lord from henceforth; yea, saith the Spirit, that they may rest from their labors; and their works do follow them."

